

Board of Massage Therapy P.O. Box 20 Morton, MS 39117

Robert Wilkins, LMT

AGENCY ADDRESS CHIEF EXECUTIVE OFFICER

	Actual Expenses FY Ending June 30, 2014	Estimate Expenses FY Ending June 30, 2015	Requested for FY Ending June 30, 2016	Requested Increase (+) or Decrease (-) FY 2016 vs. FY 2015 (Col. 3 vs. Col. 2)	
				AMOUNT	PERCENT
<b>I. A. PERSONAL SERVICES</b>					
1. Salaries, Wages & Fringe Benefits (Base)					
a. Additional Compensation					
b. Proposed Vacancy Rate (Dollar Amount)					
c. Per Diem	880	2,000	2,000		
<b>Total Salaries, Wages &amp; Fringe Benefits</b>	<b>880</b>	<b>2,000</b>	<b>2,000</b>		
2. Travel					
a. Travel & Subsistence (In-State)	3,505	6,000	6,000		
b. Travel & Subsistence (Out-of-State)		4,000	4,000		
c. Travel & Subsistence (Out-of-Country)					
<b>Total Travel</b>	<b>3,505</b>	<b>10,000</b>	<b>10,000</b>		
<b>B. CONTRACTUAL SERVICES (Schedule B):</b>					
a. Tuition, Rewards & Awards		900	900		
b. Communications, Transportation & Utilities	15	100	100		
c. Public Information					
d. Rents					
e. Repairs & Service					
f. Fees, Professional & Other Services	155,596	165,000	165,000		
g. Other Contractual Services	1,806	2,000	2,000		
h. Data Processing	10,783	30,000	30,000		
i. Other	118	2,000	2,000		
<b>Total Contractual Services</b>	<b>168,318</b>	<b>200,000</b>	<b>200,000</b>		
<b>C. COMMODITIES (Schedule C):</b>					
a. Maintenance & Construction Materials & Supplies					
b. Printing & Office Supplies & Materials	320	5,000	5,000		
c. Equipment, Repair Parts, Supplies & Accessories					
d. Professional & Scientific Supplies & Materials					
e. Other Supplies & Materials	980				
<b>Total Commodities</b>	<b>1,300</b>	<b>5,000</b>	<b>5,000</b>		
<b>D. CAPITAL OUTLAY:</b>					
<b>1. Total Other Than Equipment (Schedule D-1)</b>					
<b>2. Equipment (Schedule D-2):</b>					
b. Road Machinery, Farm & Other Working Equipment					
c. Office Machines, Furniture, Fixtures & Equipment					
d. IS Equipment (Data Processing & Telecommunications)	5,544	2,000	2,000		
e. Equipment - Lease Purchase					
f. Other Equipment					
<b>Total Equipment (Schedule D-2)</b>	<b>5,544</b>	<b>2,000</b>	<b>2,000</b>		
<b>3. Vehicles (Schedule D-3)</b>					
<b>4. Wireless Comm. Devices (Schedule D-4)</b>					
<b>E. SUBSIDIES, LOANS &amp; GRANTS (Schedule E):</b>					
<b>TOTAL EXPENDITURES</b>	<b>179,547</b>	<b>219,000</b>	<b>219,000</b>		
<b>II. BUDGET TO BE FUNDED AS FOLLOWS:</b>					
Cash Balance-Unencumbered	302,650	294,727	255,727	( 39,000)	( 13.23%)
General Fund Appropriation (Enter General Fund Lapse Below)					
State Support Special Funds					
Federal Funds _____ Other Special Funds (Specify) _____					
Board of Massage Therapy Fees	171,624	180,000	180,000		
Less: Estimated Cash Available Next Fiscal Period	( 294,727)	( 255,727)	( 216,727)	( 39,000)	( 15.25%)
<b>TOTAL FUNDS (equals Total Expenditures above)</b>	<b>179,547</b>	<b>219,000</b>	<b>219,000</b>		
GENERAL FUND LAPSE					
<b>III. PERSONNEL DATA</b>					
Positions Authorized in Appropriation Bill	Permanent: Full Time:				
	Part Time:				
	Time-Limited: Full Time:				
	Part Time:				
Average Annual Vacancy Rate (Percentage)	Permanent: Full Time:				
	Part Time:				
	Time-Limited: Full Time:				
	Part Time:				

Approved by: Robert Wilkins, LMT  
Official of Board or Commission

Budget Officer: Yvonne Laird / heart\_yvonne@bellsouth.net

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Submitted by: Yvonne Laird  
Name

Title: Board Administrator

Date: July 21, 2014